



Expert Level - Master Development Plan

EVMS Specialist Certification Program (ESCP)

Member Name: _____

Position Title: _____

Series and Grade: _____

Supervisor Name: _____

Long Term Goals of Member (5 -10 years)

- _____

- _____

Short Term Goals of Member (1-5 years)

- _____

- _____

- _____

Signature

Date

Member: _____ / _____ / _____

Supervisor: _____ / _____ / _____

Course Completion Tracking

Required DAU Courses for Expert Level Certification	
Course #/Title	Date Completed/Notes
BCF 301, Business, Cost Estimating, and Financial Management	
CLM 031, Improved Statement of Work	

Required DCMA Courses for Expert Level Certification	
Course #/Title	Date Completed/Notes
EVMS204, Schedule Risk Assessments	

Required OTHER Courses for Expert Level Certification	
Course #/Title	Date Completed/Notes
EVMS206 (LearningTree.com), Public Speaking – Delivering	
EVMS207, Leadership Training – Leadership and Interpersonal	
PROJ0581 (Skillport), Communications Planning and Information Distribution	

Recommended DAU Courses for Expert Level Certification	
Course #/Title	Date Completed/Notes
CLL 015, Business Case Analysis	
CLM 014, IPT Management and Leadership	

Work Experience Tracking

Required Experience	
Description	Date Completed/Notes
1) Achieved all Journey level requirements	
2) Choose the following as appropriate: (PAVs and IVs are not considered "Compliance Reviews") 2a) (required) HQ (Ops or E&A) Only: serve as a Review Chief or Review Deputy on two Compliance Reviews 2b) (choose 2b or 2d) Non-EVM HQ Only: Three years leading system surveillance in accordance with the Standard Surveillance Instruction (SSI) 2c) (required) Non-EVM HQ Only: Serving as an Area Lead on one Compliance Review (sign up by sending an email to ESCPBoard@dcma.mil) 2d) (choose 2d or 2b) Non-EVM HQ Only: Three years performing predictive analysis in accordance with the Major Program Support (MPS) Instruction	
3) Six years of professional experience with job responsibilities related to Earned Value Management disciplines such as: system surveillance, predictive analysis, or compliance reviews in support of an acquisition program	
4) One year providing OJT/Mentoring for a DCMA peer at the Journey level	
5) Actively participate in one EVM conference/working group/technical interchange meeting as either a presenter or panel member OR present a briefing to flag level leadership	

Desired Experience	
Description	Date Completed/Notes
1) Lead one EVM Division process/policy/training revision team	



Expert Level ESCP Progress Report and Evaluation

Member and Supervisor assess Member progress/skills with respect to the MDP.

PART I: Annual Progress Report (to be completed by Member)

Member Name: _____

Position Title: _____

Series and Grade: _____

Supervisor Name: _____

TIME PERIOD: From ____/____/____ To ____/____/____

COURSES COMPLETED

- Include the course number and completion date
- List all MDP coursework completed including required, recommended, or other

<i>Course # (e.g. EVMS100)</i>	<i>Completion Date</i>

WORK EXPERIENCE

- Include a thorough description and start/stop dates of the activity
- List “ongoing” as the date if the activity has not finished
- List all MDP required activities as well as any other meetings, conferences, etc that are EVM-related

<i>Description</i>	<i>Start Date</i>	<i>Stop Date</i>

OVERALL SELF ASSESSMENT

- Use this page to write at least one paragraph describing your progress in the ESCP during the past year
- Discuss how your coursework and work experiences were beneficial during the past year
- Discuss your strengths and areas for improvement
- Discuss difficulties encountered (e.g. application denied for a ESCP required course)

Self Assessment:

Signature

Date

Member: _____/_____/_____

PART II: Annual Progress Report (to be completed by Supervisor)

SUPERVISORY ASSESSMENT

- Assess progress based upon each of the items listed below. Include any relevant inputs from external sources as well (e.g. other supervisors, peer feedback, etc)
- Cite specific examples of accomplishment and avoid using general terminology
- Discuss any areas for improvement and any problems encountered that were beyond the Member's control

1) Progress in acquiring knowledge of the Earned Value Management process.

Below

Meets

Exceeds

COMMENTS: (provide a one or two paragraph justification for the rating provided)

2) Progress in applying knowledge of the Earned Value Management process to daily job functions.

Below

Meets

Exceeds

COMMENTS: (provide a one or two paragraph justification for the rating provided)

3) Progress towards achieving Expert level certification in the ESCP.

Below

Meets

Exceeds

COMMENTS: (provide a one or two paragraph justification for the rating provided)

4) Progress in developing leadership skills and gaining leadership experience.

Below

Meets

Exceeds

COMMENTS: (provide a one or two paragraph justification for the rating provided)

5) Assess ability to manage, task, make decisions, prioritize workload, and identify and solve problems.

Below

Meets

Exceeds

COMMENTS: (provide a one or two paragraph justification for the rating provided)

6) Progress in acquiring knowledge of interpersonal and communication skills. Assess written and oral skills, consider use of proper grammar, ability to represent and convey thoughts clearly, and performance in meetings, presentations, and effectiveness in working with others.

Below

Meets

Exceeds

COMMENTS: (provide a one or two paragraph justification for the rating provided)

GENERAL OBSERVATIONS AND COMMENTS:

Describe the Member's performance and their potential for advancement based upon that performance.

COMMENTS: (provide a one or two paragraph statement)

SUPERVISORS OVERALL RATING

- Consider the Member's overall progress in achieving Expert level certification within two years – are they on track?
- Consider how the Member has supported this ESCP – do they demonstrate a willingness to complete the coursework and work experience requirements?
- Consider how the Member has utilized the required coursework and work experience of this ESCP to benefit daily job functions – are they applying what they have learned?
- Consider the ratings provided above

Outstanding

Exceeds Fully Successful

Fully Successful

Minimally Successful

Unacceptable

COMMENTS: (provide a one or two paragraph statement which supports the selected rating)

Signature

Date

Member: _____ / _____ / _____

Supervisor: _____ / _____ / _____